UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINIOS

In re: MICHAEL A. DE PRIESTER (CONV\\$6/22/1\\$0)ase No. 17-82346

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	Debtor(s)			§					

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Lydia S. Meyer, Chapter 13 Trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C § 1302(b)(1). The Trustee declares as follows:

- 1) The case was filed on 10/06/2017.
- 2) The plan was confirmed on 12/01/2017.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C § 1329 on NA.
- 4) The Trustee filed action to remedy default by the debtor(s) in performance under the plan on NA.
- 5) The case was converted on 06/22/2018.
- 6) Number of months from filing or conversion to last payment: 8.
- 7) Number of months case was pending: 9.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: <u>\$0.00</u>.
- 10) Amount of unsecured claims discharged without full payment: \$0.00.
- 11) All checks distributed by the Trustee relating to this case have NOT cleared the bank.

Receipts:		
Total paid by or on behalf of the debtor(s)	\$ 7,200.00	
Less amount refunded to debtor(s)	\$ 475.00	
NET RECEIPTS		\$ 6,725.0

NET RECEIPTS \$ 6,725.00 Expenses of Administration: Attorney's Fees Paid Through the Plan \$ 3,600.00 Court Costs \$ 0.00 Trustee Expenses & Compensation \$ 607.50 Other \$ 0.00 TOTAL EXPENSES OF ADMINISTRATION \$ 4,207.50 Attorney fees paid and disclosed by debtor(s): \$ 0.00

Scheduled Creditors:						
Creditor		Claim	Claim	Claim	Principal	Interest
<u>Name</u>	<u>Class</u>	Scheduled	<u>Asserted</u>	Allowed	<u>Paid</u>	<u>Paid</u>
ATTORNEY GARY C FLANDERS	Lgl	4,000.00	4,000.00	4,000.00	3,600.00	0.00
EXETER FINANCE CORPORATION	Uns	0.00	727.82	727.82	0.00	0.00
HEIGHTS FINANCE	Sec	10,000.00	14,044.95	10,000.00	1,501.81	498.19
HEIGHTS FINANCE	Uns	3,900.00	0.00	4,044.95	0.00	0.00
USDA RURAL DEVELOPMENT	Sec	23,000.00	20,280.79	20,280.79	517.50	0.00
ACE CASH	Uns	0.00	NA	NA	0.00	0.00
AMERICASH LOANS LLC	Uns	1,180.00	184.72	184.72	0.00	0.00
ANDERSON PLUMBING AND	Uns	785.00	736.32	736.32	0.00	0.00
AT&T MOBILITY II LLC % AT&T	Uns	1,500.00	1,545.63	1,545.63	0.00	0.00
BERG JOHNSON	Uns	115.00	NA	NA	0.00	0.00
BEST CHOICE 123	Uns	780.00	NA	NA	0.00	0.00
BRISTOL WEST INSURANCE	Uns	25.00	NA	NA	0.00	0.00
CAMELOT RADIOLOGY	Uns	300.00	NA	NA	0.00	0.00
CENTRAL ILLINOIS LOANS INC	Uns	3,600.00	3,674.58	3,674.58	0.00	0.00
CENTRAL ILLINOIS LOANS	Uns	2,650.00	NA	NA	0.00	0.00
CHECK INTO CASH OF IL	Uns	570.00	577.50	577.50	0.00	0.00
COMCAST	Uns	745.00	NA	NA	0.00	0.00
COMCAST	Uns	535.00	NA	NA	0.00	0.00

Scheduled Creditors:						
Creditor		Claim	Claim	Claim	Principal	Interest
<u>Name</u>	Class	Scheduled	Asserted	Allowed	<u>Paid</u>	Paid
MIDLAND CREDIT MANAGEMENT	Uns	500.00	742.99	742.99	0.00	0.00
DISH NETWORK	Uns	700.00	NA	NA	0.00	0.00
DISH NETWORK	Uns	605.00	NA	NA	0.00	0.00
ELGIN LAB PHYSICIANS	Uns	6.00	NA	NA	0.00	0.00
EXPRESS CASH MART OF ILLINOIS	Uns	700.00	NA	NA	0.00	0.00
RESURGENT CAPITAL SERVICES	Uns	300.00	216.36	216.36	0.00	0.00
JEFFERSON CAPITAL SYSTEMS LLC	Uns	530.00	531.56	531.56	0.00	0.00
FIRST STATE BANK	Uns	715.00	NA	NA	0.00	0.00
FRONTIER COMMUNICATION	Uns	260.00	NA	NA	0.00	0.00
KISHWAUKEE HOSPITAL	Uns	1,300.00	NA	NA	0.00	0.00
KYTE RIVER EMERGENCY	Uns	390.00	NA	NA	0.00	0.00
MIDLAND SURGICAL CENTER	Uns	800.00	NA	NA	0.00	0.00
ROCKFORD MERCANTILE AGENCY	Uns	1,250.00	1,258.93	1,258.93	0.00	0.00
MIDWEST DENTAL	Uns	100.00	NA	NA	0.00	0.00
MIDWEST ORTHOPEDIC	Uns	1,980.00	NA	NA	0.00	0.00
MIDWEST ORTHOPAEDIC ASSOC	Uns	2,200.00	NA	NA	0.00	0.00
MULTI LOAN SOURCE	Uns	785.00	NA	NA	0.00	0.00
NICOR GAS	Uns	500.00	1,053.55	1,053.55	0.00	0.00
NICOR	Uns	430.00	NA	NA	0.00	0.00
NORTHWESTERN MEDICINE	Uns	40.00	NA	NA	0.00	0.00
OSFMG- ROCHELLE HOSP % CHRI	Uns	45.00	161.26	161.26	0.00	0.00
PEOPLE SUBSCRIPTION	Uns	90.00	NA	NA	0.00	0.00
ROCHELLE COMMUNITY HOSPITAL	Uns	15,300.00	NA	NA	0.00	0.00
ROCHELLE MUNICIPAL UTILITIES	Uns	2,200.00	NA	NA	0.00	0.00
ROCHELLE MUNICIPAL UTILITIES	Uns	1,200.00	NA	NA	0.00	0.00
ROCKFORD ANESTHESIOLOGISTS	Uns	255.00	NA	NA	0.00	0.00
ROCKFORD ASSOC PATHOLOGISTS	Uns	10.00	NA	NA	0.00	0.00
SFC	Uns	1,500.00	1,013.55	1,013.55	0.00	0.00
SILVER CLOUD FINANCIAL	Uns	865.00	700.00	700.00	0.00	0.00
SPOT LOAN	Uns	1,000.00	NA	NA	0.00	0.00
STILLMAN BANK	Uns	400.00	NA	NA	0.00	0.00
SWEDISH AMERICAN HOSPITAL	Uns	30.00	27.43	27.43	0.00	0.00
VERIZON BY AMERICAN	Uns	2,200.00	2,167.61	2,167.61	0.00	0.00
VERIZON BY AMERICAN	Uns	30.00	819.80	819.80	0.00	0.00
WISE FINANCE	Uns	2,500.00	NA	NA	0.00	0.00

Scheduled Creditors:						
Creditor		Claim	Claim	Claim	Principal	Interest
<u>Name</u>	<u>Class</u>	Scheduled	Asserted	Allowed	<u>Paid</u>	<u>Paid</u>
WORLD ACCEPTANCE	Uns	875.00	868.79	868.79	0.00	0.00
WORLD ACCEPTANCE	Uns	2,150.00	1,703.76	1,703.76	0.00	0.00
RESURGENT CAPITAL SERVICES	Uns	0.00	515.97	515.97	0.00	0.00

Summary of Disbursements to Creditors:			
	Claim Allowed	Principal Paid	Interest Paid
Secured Payments:			
Mortgage Ongoing	\$ 0.00	\$ 0.00	\$ 0.00
Mortgage Arrearage	\$ 20,280.79	\$ 517.50	\$ 0.00
Debt Secured by Vehicle	\$ 10,000.00	\$ 1,501.81	\$ 498.19
All Other Secured	\$ 0.00	\$ 0.00	\$ 0.00
TOTAL SECURED:	\$ 30,280.79	\$ 2,019.31	\$ 498.19
Priority Unsecured Payments:			
Domestic Support Arrearage	\$ 0.00	\$ 0.00	\$ 0.00
Domestic Support Ongoing	\$ 0.00	\$ 0.00	\$ 0.00
All Other Priority	\$ 0.00	\$ 0.00	\$ 0.00
TOTAL PRIORITY:	\$ 0.00	\$ 0.00	\$ 0.00
GENERAL UNSECURED PAYMENTS:	\$ 23,273.08	\$ 0.00	\$ 0.00

Disbursements:	
Expenses of Administration Disbursements to Creditors	\$ 4,207.50 \$ 2,517.50
TOTAL DISBURSEMENTS:	\$ 6,725.00

12) The Trustee certifies that the foregoing summary is true and complete and all administrative matters for which the Trustee is responsible have been completed. The Trustee requests that the Trustee be discharged and granted such other relief as may be just and proper.

Date: <u>07/09/2018</u> By: <u>/s/ Lydia S. Meyer</u> Trustee

STATEMENT: This Uniform Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.